



Docket No.: 5288-0103PUS1  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Robert Christian GEDDES

Application No.: 10/570,134

Confirmation No.: 7441

Filed: March 1, 2006

Art Unit: N/A

For: BOX LOCATING ACCESSORY

Examiner: Not Yet Assigned

**REQUEST FOR REFUND**  
**(IMPROPER CHARGE OF DEPOSIT ACCOUNT)**

MS 16  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

I. REFUND REQUEST

This is a request for a refund with respect to the charge to Deposit Account 02-2448 shown on the statement for the month of 03-01-06 for the above-identified

☒ application

☐ patent

☐ A copy of the monthly statement in which the error referred to occurs, accompanies this request.

## II. FEES CHARGED FOR WHICH REFUND REQUESTED

|  | AMOUNT OF<br>REFUND<br><u>REQUESTED</u> |
|--|---|
| <input type="checkbox"/> filing fee  | _____                                   |
| <input checked="" type="checkbox"/> search fee   | <u>500.00</u>                           |
| <input checked="" type="checkbox"/> examination fee  | <u>200.00</u>                           |
| <input type="checkbox"/> surcharge for filing the basic filing<br>on a date later than the filing date of<br>the application (37 C.F.R. § 1.16(e))                   | _____                                   |
| and/or   |   |
| <input checked="" type="checkbox"/> surcharge for filing the oath or declaration<br>on a date later than the filing date of the<br>application (37 C.F.R. § 1.16(e)) | <u>130.00</u>                           |
| <input type="checkbox"/> extension of term   |   |
| <input type="checkbox"/> first month   | _____                                   |
| <input type="checkbox"/> second month  | _____                                   |
| <input type="checkbox"/> third month   | _____                                   |
| <input type="checkbox"/> fourth month  | _____                                   |
| <input type="checkbox"/> excess claims   | _____                                   |
| <input type="checkbox"/> issue fee   | _____                                   |
| <input type="checkbox"/> petition fee  | _____                                   |

- ☐ patent maintenance fee \_\_\_\_\_
- ☐ first maintenance fee \_\_\_\_\_
- ☐ second maintenance fee \_\_\_\_\_
- ☐ third maintenance fee \_\_\_\_\_
- ☐ patent maintenance fee surcharge \_\_\_\_\_
- ☐ Other: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

TOTAL REFUND REQUESTED 830.00

III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR

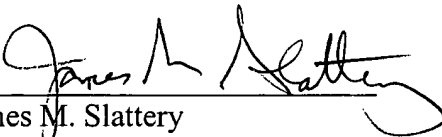
IV. MANNER OF REFUND

Please make refund by crediting Account No. 02-2448.

We respectfully request that the attached copy of this letter be returned to us with an indication that the credit has been processed.

Dated: March 14, 2007

Respectfully submitted,

By   
James M. Slattery  
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Attorney for Applicant

Attachment(s)